APPLICATION TO SELL ALCOHOL BEVERAGES

	\square REQUEST FOR N	MANAGER	☐ REQU	EST FOR EMPLOYEE	
1. Name of applicant			Phone #		
	Location Address				
	Mailing Address				
2.	Age of applicant	Race	Mai	tial Status	
3.	Give a brief personal histo	ry of yourself:			
	Name of Business for which	h you wish to work: _			
5.	Have you ever been arrested or convicted of a crime? If so, explain:				
6.	Give the names of three (3)	persons who will vou	ich for your character:		
	Name	Address		Phone #	
the app kno the	undersigned affiant, who, on be lication for a license to engage in wledge and belief, and that no in	ing first duly sworn, on oan in the business of selling alon information has been omitt City of Jesup; that any an	th deposes and says that all cohol beverages in the City of the that will materially effect	f said State and County to administer oaths, answers given to questions on this of Jesup, Georgia are true to the best of his the granting or denial of such license by nts attached hereto are true and correct to	
		Si	gned		
Sw	orn to and subscribed befo		Applicant		
	day of	, 20			
No.	tary				
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Upon receipt of application, license fee and an advertising fee of \$50.00 must be received. ** (License fee needs to be in the form of money order or cashiers check, the advertising fee may be in the form of a check) **

Commission Expires: